Interim Designation of Agent to Receive Notification of Claimed Infringement

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): www.movielink.com	
Name of Agent Des	
Notification of Clair	med Infringement: Peter W. Sheil, General Counsel
or similar designation is no location):	ignated Agent to which Notification Should be Sent (a P.O. Box of acceptable except where it is the only address that can be used in the geographic e, 4th Floor, Santa Monica, CA 90404
Telephone Number	of Designated Agent: (310) 264-4500
Facsimile Number o	of Designated Agent:_(310) 264-4501
Email Address of D	esignated Agent: peter.sheil@movielink.com
Signatur	tive of the Designating Service, Provider:
	Date:
Typed or Printed Nat	ne and Title: Peter W. Sheil, General Counsel
- A barn or - remen tum	107 T107 22157

Note: This Interim Designation Must be Accompanied by a \$30 Filing Fee Made Payable to the Register of Copyrights.



